

2153

:ODMA\HODMA\MANAGE\427...

LRR/MBS/ec1

09/18/03

PATENT APPLICATION

DOCKET NO. 2762.2008-000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Mark Day, Gang Lu, Barbara Liskov and James O'Toole

Application No.:

09/642,143

Group:

2153

Filed:

August 18, 2000

Examiner:

Edelman, Bradley E.

Confirmation No.:

7239

For:

REMOTE IDENTIFICATION OF CLIENT AND DNS PROXY IP ADDRESSES

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

Sept. 18, 2003

Date

Elaine Leahy

Signature

Elaine Leahy

Typed or printed name of person signing certificate

RECEIVED

SEP 24 2003

Technology Center 2100

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Amendment for filing in the above-identified application.

[] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)

(COL. 2)

(COL. 3)

SMALL ENTITY

OTHER THAN
SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	55	MINUS	* 55	0
INDEP	8	MINUS	** 8	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

	RATE	ADDIT. FEE
X	\$ 9	\$
X	\$42	\$
+	\$140	\$

OR

	RATE	ADDIT. FEE
X	\$18	\$ 0
X	\$84	\$ 0
+	\$280	\$

TOTAL = \$ 0

TOTAL = \$ 0

* not fewer than 20

** not fewer than 3

B

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

[X] A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Mark B. Solomon
Mark B. Solomon
Registration No.: 44,348
Telephone (978) 341-0036
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: 9/18/03

2